

WRITE ONLY WITH UNFADING INK—THIS IS A PERMANENT RECORD. IN case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each in order of birth stated.

## PLACE OF BIRTH

## ARIZONA STATE BOARD OF HEALTH

1. County of Hila

District of \_\_\_\_\_

Town of Miami

or \_\_\_\_\_

City of \_\_\_\_\_

## BUREAU OF VITAL STATISTICS

## ORIGINAL CERTIFICATE OF BIRTH

State Index No. 207County Registrar No. 900

Local Registrar No. \_\_\_\_\_

No. 725 1/2 Sullivan St. \_\_\_\_\_ Ward \_\_\_\_\_

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child Lorenzo Contreras { If child is not yet named, make supplemental report, as directed.3. Sex of Child Male To be answered ONLY in event of plural births. 4. Twin, triplet or other \_\_\_\_\_ 5. Legitimate? yes 6. Date of birth Oct. 29, 1926

7. Date of birth Month Day Year

8. FATHER

Full name Alejandro Contreras9. Residence (Usual place of abode) MiamiIf non-resident, give place and state. Arizona10. Color or race Mex.11. Age at last birthday 26 (Years)12. Birthplace (city or place) Mimbres(State or country) New Mex.

13. Occupation

Nature of Industry Miner

20. Number of children of this mother

(Taken as of time of birth of child herein certified and including this child.)

(a) Born alive and now living 3(b) Born alive but now dead 1

(c) Stillborn \_\_\_\_\_

14. MOTHER

Full maiden name Gregoria Nava15. Residence (Usual place of abode) MiamiIf non-resident, give place and state. Arizona16. Color or race Mex.17. Age at last birthday 22 (Years)18. Birthplace (city or place) Santa Rita(State or country) New Mex.

19. Occupation

Nature of Industry Housewife21. Were precautions taken against ophthalmia neonatorum? yes

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

I hereby certify that I attended the birth of this child, who was born at 6:30 A. m. on the date above stated

(Born alive or stillborn.)

Signature Beryl M. Terzon M.D. (Physician or midwife.)Address Miami, Arizona

\*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Given name added from a supplemental report. Filed Nov 4, 1926 R. E. Irwin

Month, day, year Local Registrar.

Registrar Filed \_\_\_\_\_, 19 \_\_\_\_\_ County Registrar.

332-1029-751